Department of Health Care Services
Children's Medical Services Network

CMS Net Web

Registration

Section 44

Revised 5/6/2014

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1 DEFINITIONS, ABBREVIATIONS, & ACRONYMS

The following terms, abbreviations, and acronyms may be used in this document:

Term	Definition
CCS	California Children's Services
CIN	Client Identification Number
CMS	Children's Medical Services
CMS Net	CMS Case Management System
CMS Net Legacy	CMS Case Management System – Legacy Application
CMS Net Web	CMS Case Management System – Web Application
DHCS	Department of Health Care Services
GHPP	Genetically Handicapped Persons Program
HCP or HP	Health Care Plan
HFP or HF	Healthy Families Plan
HRIF	High Risk Infant Follow-up
ICD	Int'l Classification of Diseases (Diagnosis/Procedure Code)
Inappropriate Letter	A letter sent to the Provider/Managed Care Plan/HF informing them the referral is incomplete, inaccurate or needs more clarification.
MCP	Managed Care Plan
Medical Home	Client's designated primary care physician and/or the physician who provides a medical home.
MEDS	Medi-Cal Eligibility Data System
MTP	Medical Therapy Program
MTU	Medical Therapy Unit
NICU	Neonatal Intensive Care Unit
PEDI	Provider Electronic Data Interchange
NPI	National Provider Identifier
PMF	Provider Master File (Medi-Cal Provider list)
PSSN	Pseudo Social Security Number
Referral Type	Case or Service
Requestor	Any referral source other than a provider listed in the PMF (Non-PMF provider).
SAR	Service Authorization Request
SCC	Special Care Center
SSN	Social Security Number

2 INTRODUCTION

Registration is the intake module for the Children's Medical Services Network Section. Clients to be registered for the CCS or GHPP must be entered through this module. Case referrals received from Plans or Providers and entered through the Referral Tracking Module are available to carrier forward into the Registration once they are "Accepted for Registration".

Registration allows users to:

- Register new CCS and GHPP clients into CMS Net.
- Search the SCI System for a client's CIN or to create a new CIN.
- Record key demographics related to the client such as name, date of birth, gender, language, client and primary addressee contact information, and phone numbers.
- Record client case referrals and the type of documentation submitted with the referral.
- Record the client's suspected diagnosis, linking known siblings, and documenting the names of case management staff/caseload.
- Record other addressee contacts related to the client, such as medical homes, special care centers, treating specialists, group homes, or other family members.
- Access the Registration Face Sheet to view or print.
- Access a Summary page to view case referral activities,
- Mark a record as duplicate (i.e. two records registered in CMS Net)

3 REGISTRATION / SEARCH – PATIENT SCREEN

3.1 Search for Patient – Search Client

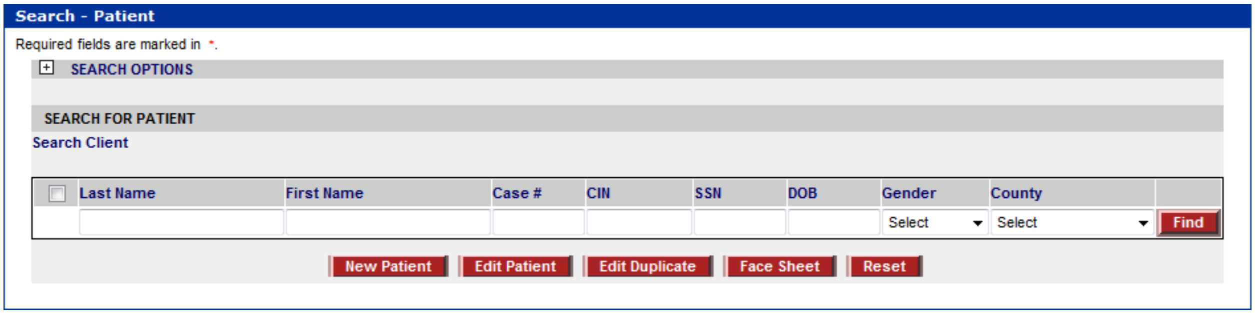


Figure 3-1

3.1.1 Last Name

Enter a client's Last Name then press Enter or click Find to select a client.

3.1.2 First Name

Enter a client's First Name and Last Name then press Enter or click Find to select a client. Last Name is required when searching by First Name unless other criteria are entered, such as Gender.

3.1.3 Case

Enter a client's 7 digit case number to select a client with a 1 to 1 match. Legacy cases may be less than 7 digits long and the number may grow longer than 7 digits over time.

3.1.4 CIN

Search for a client using their 9 digit Client Identification Number (CIN). CIN numbers are formatted as 12345678A. This field is limited to 9 digits. CIN numbers may include a 10^{th} character, called a check digit, and may or may not include a leading space. This check digit should be removed when searching by CIN and will be truncated if the full 10 digit number is pasted into the field.

3.1.5 SSN

Search for a client by Social Security Number (SSN) or Pseudo Social Security Number (PSSN), an alternate number issued in lieu of a valid SSN. SSN is a 9 digit number, formatted as 123-45-6789. PSSN is a total of 9 characters long, 8 digits and ends with the letter P, formatted as 123-45-678P.

3.1.6 DOB

Search for a client by Date of Birth (DOB), using the format MM/DD/YYYY or M/D/YY. This field is typically used in combination with the client's name and gender.

3.1.7 Gender

Search for a client by selecting their Gender from the dropdown list. This field is typically used in combination with a name and date of birth. The following selections are available: Male, Female, Not Known

3.1.8 County

Search for a client by selecting their County. This field is typically used in combination with other selections, such as client name, gender and/or date of birth.

3.2 Search Options

Maximize search options by clicking on the plus (+) sign button to the left of the Search Options header. Minimize this section by clicking the minus (-) sign button.

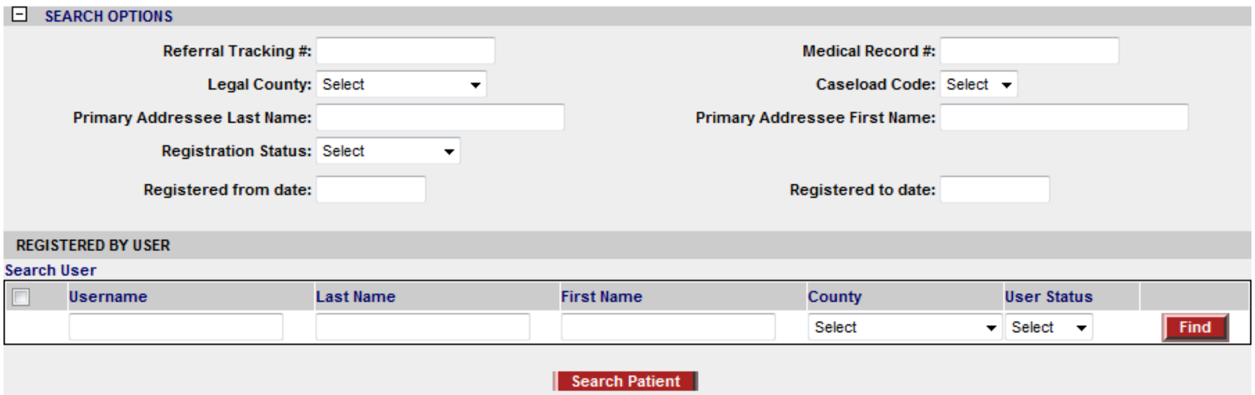


Figure 3-2

3.2.1 Referral Tracking

Find a referral by entering the Referral Tracking Number, a unique number assigned to the referral when it was created. A search by Referral Tracking Number cannot be performed in combination with other criteria. The date range will be ignored when searching by Referral Tracking Number. If a referral cannot be found by tracking number it is likely that the number is incorrect, the referral came from a source other than a provider or plan, or was marked for deletion.

Case Referrals are typically 7 digits long, although some older cases may be 6 digits long and over time, case numbers may grow beyond 7 digits in length. Service Referrals (SARs) are exactly 11 digits long. This field has a max limit of 11 digits.

3.2.2 Medical Record

A number issued by a client's provider or plan that is unique to the individual or institution that issued it, but may not be unique within CMS Net. Therefore, the same medical record number may potentially appear on more than one case. This number may be entered in Registration on the Addressee tab when an addressee is added and is dependent on the selected Relationship to Patient. This field has a maximum length of 20 characters and is not a required field.

3.2.3 Legal County

County responsible for case management and authorization of services for client. May differ from Residence County in certain situations, such as fostered children.

3.2.4 Caseload Code

Caseload Code is dependent on Legal County selection. When a Legal County is chosen, the Caseload Code field will populate a filtered list of selections for that county.

3.2.5 Primary Addressee Last Name

Search for a client by the Primary Addressee's first name entered on the Patient Information Tab in the Patient/Primary Addressee section.

3.2.6 Primary Addressee First Name

Search for a client by the Primary Addressee's last name entered on the Patient Information Tab in the Patient/Primary Addressee section.

3.2.7 Registration Status

Search by the status the case is currently in. Selections are: Active, Closed, Denied, Not Open, Pending, Reopen Pending

3.2.8 Registered From Date

Search by date client was formally registered in CMS Net within specified date range.

3.2.9 Registered To Date

Search by date client was formally registered in CMS Net within specified date range.

3.2.10 Registered by User – Search User

Search for referrals by selecting the CMS Net user who created the referral. Enter criteria related to the user and then press Enter or click the Find button. This search function filters based on the "Referral Entered By" field. *Contained within the Advanced Search Options hidden menu. Multiple users may be selected.*

3.2.10.1 Username

Enter the unique login name of the user who created the referral.

3.2.10.2 Last Name
Select user who created the referral by entering their last name.

3.2.10.3 First Name
Select user who created the referral by entering their first name.

3.2.10.4 County
Select the user who created a referral by choosing their County from the drop-down list. GHPP, SRO, SCRO, and State Administrators are found at the bottom of the list. This field is typically used in combination with other criteria.

3.2.10.5 User Status
Select the user who created a referral by choosing their user account status. This field is typically used in combination with other criteria. Selections are: Active, Inactive

3.3 Navigation Buttons

3.3.1 Find
Find buttons may appear to the right of fields that have a multi-select list which is dynamic, and/or too lengthy to display in a drop-down menu. These fields allow a user to enter search criteria and click the Find button to display a list of results to choose from. A user can then make a selection and search for referrals based on this criteria. These fields are sometimes used in combination with other criteria.

3.3.2 Search Patient
Performs a search based on criteria entered in Registered by User section. *Contained within the Search Options hidden menu.*

3.3.3 New Patient
Begin the Registration process for a new client. This button will ignore any criteria entered on the Registration search page.

3.3.4 Edit Patient
If multiple clients are selected, clicking this button will allow you to navigate back and forth between selections.

3.3.5 Mark Duplicate
Opens Registration for the selected client and lands on the Mark Duplicate tab, allowing a user to mark the record as a duplicate of another case. Active cases may not be marked as duplicate. In order to mark an active case as duplicate, the case must first be closed or reverted back to the previous pending status.

3.3.6 Face Sheet

Displays a summary of a client's case information in a PDF format for viewing or printing

3.3.7 Reset

Clears all criteria previously selected or entered in fields.

3.3.8 Remove

Clicking the 'X' button on a corresponding row will remove the currently selected client from the selection list.

4 REGISTRATION SEARCH – RESULTS SCREEN

4.1 Search Results Fields

4.1.1 Select

Multiple selections can be made by clicking the circular radio button in the far left column on the row corresponding to the desired client. These will automatically be inserted in the search screen as they are clicked. Once selections have been made, a user may click on the Continue button to proceed back to the search page.

4.1.2 Case Number

Unique 7 digit number assigned to a case during registration. Legacy cases may be less than 7 digits long and may grow longer than 7 digits over time.

4.1.3 Caseload Code

Organizational unit within the county to which the case is assigned.

4.1.4 Client Name

Client's full name or alias.

4.1.5 AKA

Indicates if this is the client's current name (blank), birth name [B], or an alias [A].

4.1.6 DOB

Client's date of birth.

4.1.7 Gender

Indicates if the client is male, female, or the gender is not known.

4.1.8 CIN

Client Identification Number, a unique identification number assigned by Medi-Cal.

4.1.9 County

Legal County responsible for case management and authorization of services for client. May differ from Residence County in certain situations, such as fostered children.

4.1.10 Reg

Indicates the current status of case. Statuses are displayed as: Act (Active), Clo (Closed), Den (Denied), Not (Not Open), Pen (Pending), Reo (Reopen Pending)

4.1.11 Med
Indicates if case is medically eligible for CCS. If case is eligible, the letter 'E' is displayed. If a case is ineligible, this field is blank.

4.1.12 Fin
Indicates if case is financially eligible for CCS. If case is eligible, the letter 'E' is displayed. If a case is ineligible, this field is blank.

4.1.13 Res
Indicates if case is residentially eligible for CCS. If case is eligible, the letter 'E' is displayed. If a case is ineligible, this field is blank.

4.1.14 Pgrm End Date
End date of most recent program eligibility period for client.

4.1.15 Client Elig
Current CCS aid code on case.

4.1.16 Primary Addr
Name of individual designated as primary addressee in Registration.

4.2 Navigation Buttons

4.2.1 Continue
Click the Continue button after selections are made to return to the Registration client search screen. *Multiple selections allowed.*

5 Client Information Header

The Client Information Header is displayed on various pages in CMS Net and provides a static view of details about a selected client. By default, only basic information is displayed when the header is minimized, but may be expanded by clicking on the plus sign (+) to view details. Clients who have not been fully registered in CMS Net will display minimal details with Registration Status showing as Incomplete and the Case Number field will be blank.

5.1 Face Sheet

Displays a summary of a client's case information in a PDF format for viewing or printing.

5.2 Client Information – Basic View

Displayed by default.

5.2.1 Client Name

Client's full name or alias.

5.2.2 Case Number

Unique 7 digit number assigned to a case during registration. Legacy cases may be less than 7 digits long and may grow longer than 7 digits over time.

5.2.3 Date of Birth

Client's date of birth.

5.3 Client Information – Detailed View

5.3.1 Alias

Previous names the selected client has used.

5.3.2 Reg Status

Current Case Status . Case Statuses are: Active, Closed, Denied, Not Open, Pending, and Reopen Pending

5.3.3 Client Elig Status

Current CCS aid code on case.

5.3.4 Application Status

Status the application is currently in. Application Statuses are: 1st Letter Sent, 2nd Letter Sent, 3rd Letter Sent, No Action, Signed App

5.3.5 CIN
Currently assigned Client Identification Number, a unique identification number assigned by Medi-Cal.

5.3.6 Program Begin Date
Begin Date of current program eligibility period.

5.3.7 Diagnostic Only
Indicates if client is eligible for Diagnostic Only and not eligible for Treatment.

5.3.8 Gender
Indicates if the client is male, female, or the gender is not known.

5.3.9 Program End Date
End Date of current program eligibility period.

5.3.10 PSA Status
Status the PSA is currently in. PSA Statuses are: Signature Pending, Not Required, Not Signed, Signed

5.3.11 Language
Specifies primary language spoken by client.

5.3.12 Medical Elig Status
Indicates client's CCS medical eligibility. Populated from Medical Eligibility screen in Eligibility. Medical Elig Statuses are: Eligible, Ineligible

5.3.13 Caseload Code
Organizational unit within the county to which the case is assigned.

5.3.14 County
Legal County responsible for case management and authorization of services for client. May differ from Residence County in certain situations, such as fostered children.

5.3.15 Financial Elig Status
Indicates client's CCS financial eligibility. Populated from Financial Worksheet in Eligibility. Financial Elig Statuses are: Eligible, Ineligible, Pending

5.3.16 County Case Manager
Currently assigned case manager.

5.3.17 Medi-Cal Number

A 14 digit dynamic number assigned by Medi-Cal which is calculated based on information derived from MEDS, such as county, aid code, etc. This number may change after a MEDS Inquiry or Recon is run.

5.3.18 Residential Elig Status

Indicates client's CCS residential eligibility. Populated from Residential Worksheet in Eligibility. Residential Elig Statuses are: Eligible, Ineligible, Pending

5.3.19 Temporary Caseload

An organizational unit to which a case is temporarily assigned. When a permanent caseload is assigned, the value No will be displayed. Options are: Yes, No

5.3.20 MTU Name

Name of currently assigned Medical Therapy Unit. This name is assigned within the MTP module of CMS Net Web.

6 REGISTRATION – SCI INQUIRY TAB

SCI Inquiry allows a user to link a client's registration record to a CIN. If the client's information entered in the SCI Inquiry tab matches any records in MEDS, a user can link the CCS record to the existing CIN. If no matches are found, the user may link the CCS record to a newly created CIN.

6.1 Statewide Client Inquiry

6.1.1 Patient Name

6.1.1.1 Last Name

Current last name of client. *Required field.*

6.1.1.2 Appellation

Current name suffix of client. Selections are: I, II, III, IV, Jr, Sr

6.1.1.3 First Name

Current first name of client. *Required field.*

6.1.1.4 Middle Name

Current middle name of client.

6.1.2 Case Number

Unique 7 digit number assigned to a case during registration. Legacy cases may be less than 7 digits long. Future cases may be more than 7 digits long.

6.1.3 Birth Name

6.1.3.1 Last Name

Last name of client at birth. *Required field.*

6.1.3.2 Appellation

Name suffix of client at birth. Selections are: I, II, III, IV, Jr, Sr

6.1.3.3 First Name

First name of client at birth. *Required field.*

6.1.3.4 Middle Name

Middle name of client at birth.

6.1.4 Current CIN

Currently assigned Client Identification Number, a unique identification number assigned by Medi-Cal.

6.1.5 Date of Birth
Client's date of birth. *Required field.*

6.1.6 Gender
Indicates if the client is male, female, or the gender is not known. *Required field.*

6.1.7 SSN
Client's Social Security Number.

6.1.8 Birth Place
City, State, or Country that the client was born in. *Required field.*

6.1.9 Ethnicity
Client's cultural origin. *Required field.*

Selections are:

Alaskan Native	Black/African American	Hispanic	Other
Amerasian	Cambodian Chinese	Japanese	Samoan
American Indian	Filipino	Korean	Unknown
Asian	Guamanian	Laotian	Vietnamese
Asian Indian	Hawaiian	No Response	White

6.1.10 Residence County
County the client currently resides in. *Required field.*

6.1.11 City/State/Zip
City and State fields are automatically populated when the Zip code is selected and there is a 1 to 1 match. If multiple cities exist in this zip code, a pop-up window will allow the user to select which city the provider/plan is in. *Required field.*

6.1.12 Mother First Name
First name of client's mother. *Required field.*

6.2 SCI Inquiry Results

6.2.1 Select
Select a CIN to link to the client record by clicking the Select radio button on the corresponding row, then clicking the Link button.

6.2.2 Current Name
Current name of client linked to the CIN on corresponding row. *Pulled from MEDS.*

6.2.3 Birth Name
Client's name given at birth. *Pulled from MEDS.*

6.2.4 Gender
Indicates if client is Male or Female. *Pulled from MEDS.*

6.2.5 DOB
Client's date of birth. *Pulled from MEDS.*

6.2.6 CIN
Client Identification Number, a unique identification number assigned by Medi-Cal. *Pulled from MEDS.*

6.2.7 SSN
Client's Social Security Number. *Pulled from MEDS.*

6.2.8 CMS Patient
Case number this CIN is currently linked to in CMS Net. *Pulled from CMS Net.*

6.3 SCI Inquiry Information

6.3.1 S007-(205) Potential Duplication is Found on SCI system.
When potential duplication error is displayed, it means that based on the information entered, possible matches to existing CINs have been found in MEDS and will be displayed in the SCI Inquiry Results section for linking purposes.

6.3.2 Last Updated By/SCI Last Updated On
Last user to update the SCI Inquiry screen record on specified date.

6.4 Navigation Buttons

6.4.1 Back
Navigate back to the previous page.

6.4.2 Force Add
If no existing CIN is known and user cannot find any potential matches, the Force Add button may be used to generate a new CIN and link it to the selected case.

6.4.3 Link
Available when a potential match is found. Select desired match and click Link button.

6.4.4 Reset
Clears all criteria previously selected or entered in fields.

7 REGISTRATION – PATIENT INFORMATION TAB

7.1 Patient Header

7.1.1 Patient Name

7.1.1.1 Last Name

Last name of client. *Required field.*

7.1.1.2 Appellation

Name suffix of client. Selections are: I, II, III, IV, Jr, Sr

7.1.1.3 First Name

First name of client. *Required field.*

7.1.1.4 Middle Name

Middle name of client.

7.1.2 Case Number

Enter the letter ‘T’ to generate a temporary case number (i.e. t123456), or ‘A’ to generate a permanent case number (i.e. 1234567) when the case is saved.

7.1.3 Birth Name

7.1.3.1 Last Name

Last name of client at time of birth.

7.1.3.2 Appellation

Name suffix of client at time of birth.

7.1.3.3 First Name

First name of client at time of birth.

7.1.3.4 Middle Name

Middle name of client at time of birth.

7.1.4 Current CIN

Currently assigned Client Identification Number, a unique identification number assigned by Medi-Cal.

7.1.5 Aliases

Previous names the selected client has used.

7.1.6 Date of Birth
Client's date of birth. *Required field.*

7.1.7 Gender
Indicates if the client is male, female, or the gender is not known. *Required field.*

7.1.8 SSN
Social Security Number (SSN), a number assigned by the federal government to US citizens and non-citizens authorized to work in the US. SSN is a 9 digit number, formatted as 123-45-6789. The mother's SSN should not be entered in this field.

7.1.9 Birth Place
City, State, or Country that the client was born in. *Required field.*

7.1.10 Pseudo SSN
Pseudo Social Security Number (PSSN), an alternate number issued in lieu of a valid SSN. PSSN is a total of 9 characters long, 8 digits and ends with the letter P, formatted as 123-45-678P. The mother's PSSN should not be entered in this field.

7.1.11 Ethnicity
Client's cultural origin. *Required field.*

Selections are:

Alaskan Native	Black/African American	Hispanic	Other
Amerasian	Cambodian Chinese	Japanese	Samoan
American Indian	Filipino	Korean	Unknown
Asian	Guamanian	Laotian	Vietnamese
Asian Indian	Hawaiian	No Response	White

7.1.12 Language
Specifies primary language spoken by client. *Required field.*

7.1.13 Mother First Name
First name of client's mother. *Required field.*

7.1.14 Maiden Name
Given last name of client's mother, prior to marriage.

7.1.15 Mother SSN
Social Security Number of client's mother.

7.1.16 Mother DOB

Date of Birth of client's mother.

7.1.17 Mother Medi-Cal Nr

A 14 digit dynamic number assigned by Medi-Cal which is calculated based on information derived from MEDS, such as county, aid code, etc. This number is manually entered and is not automatically updated in CMS Net if the number changes.

7.1.18 Case transferring to another County

Check this box if case is transferring to another county. This is for notation purposes only and does not perform any action. The checkmark is retained if a case is Pending, Reopen Pending, or Active. The checkmark is removed if the case status changes to Not Open, Closed, or Denied.

7.1.19 Reg. Status

Current Case Status. Selections are: Active, Closed, Denied, Not Open, Pending, and Reopen Pending. *Required field.*

7.2 Current Referral Information

7.2.1 Referral Type

. *All Registration referrals are set to Case. This field is read-only.*

7.2.2 Tracking Number

Unique number assigned to the referral during creation. Case Referrals are typically 7 digits long, although some older cases may be 6 digits long and over time, this number may grow to be more than 7 digits..

7.2.3 Referral Entered On

Date referral was entered in CMS Net. *This field is read-only.*

7.2.4 Referral Received On

Date the referral was received by CCS. *Required field. Future dates are not allowed.*

7.2.5 Referral Status

A dynamic Referral Status is assigned to each referral and may change as the referral steps through the workflow process. Case Referral Statuses are: Accepted for Registration, Received/Pending Review, Rejected as Inappropriate

7.2.6 Legal County

County responsible for case management and authorization of services for client. May differ from Residence County in certain situations, such as fostered children. *Required field.*

7.2.7 Referral Source

Individual or group who referred the client to CCS. Supporting fields, such as Provider/Plan Type are dynamic and may be filtered or hidden or unhidden depending on the selected Referral Source. *Required field.*

If any of the following Referral Sources are selected, Provider/Plan Type field will be displayed and an individual or group must be searched for and selected from a pre-defined list and these types of providers require provider/plan Address:

Managed Care Plan, Healthy Families Plan, Insurance Carrier, Medical Home, Medical Provider, School, Local Education Agency, Foster Care Nurse, Educational Provider, Group Home Provider, Physician, Special Care Center, Medical Therapy Unit, Regional Center, SELPA.

7.2.8 Provider/Plan Type

Provider/Plan Type is dependent upon Referral Source and will be filtered based on the Referral Source selection. When searching for a provider or plan by entering a Provider/Plan Number or Provider/Plan Name, the results displayed is also filtered based on the selected Referral Source and Provider/Plan Type. Supporting fields, such as Provider/Plan Number are dynamic and may be hidden or unhidden depending on the selected Provider/Plan Type.

7.2.9 Provider/Plan Address

Provider/Plan Address is dependent upon Referral Source and will be filtered based on the Referral Source selection.

7.2.10 Residence County

County the client currently resides in. *Required field.*

7.2.11 Referral Source Name

7.2.11.1 Last Name

Last name of referral source. *Required field.*

7.2.11.2 Appellation

Name suffix of referral source.

7.2.11.3 First Name

First name of referral source.

7.2.11.4 Middle Name

Middle name of referral source.

7.3 Caseload

Caseload is used to automatically distribute cases within the county. See the CMS Net Caseload Distribution manual for more information about caseloads at: http://www.dhcs.ca.gov/services/ccs/cmsnet/Documents/cmsnetwebsection38.pdf

7.3.1 Caseload Type

Indicates the type of caseload to which the case is assigned. Caseload Type may filtered based on availability for selected county. Caseload Types are: Administrative Lock, Generic, MTU, Orthodontia. *Required field.*

7.3.2 Caseload Code

Organizational unit within the county to which the case is assigned. *Required field.*

7.3.3 Sheltered

A sheltered case is a case that should never be transferred or moved from its existing caseload code assignment. If the checkbox is grayed out for a user, it is likely that they do not have adequate privileges to flag or un-flag sheltering. Cases may be sheltered or unsheltered by a County Administrator, County Administrator Plus, State Admin, or any user with access to the feature (added by individuals with one of the above three roles).

See the CMS Net Caseload Distribution manual for more information about sheltering: http://www.dhcs.ca.gov/services/ccs/cmsnet/Documents/cmsnetwebsection38.pdf

7.4 Case Managers

Caseload non-participating counties will be able to enter information in this area. Caseload participating counties will have view-only access to their caseload case managers. Participating counties can modify case managers in the Caseload module.

7.4.1 Search User

Search for a case manager to assign to a case by entering their information and clicking the Find button.

7.4.1.1 User's last name

Case Manager's last name

7.4.1.2 County

County the Case Manager works in.

7.4.1.3 Regional Office

Regional Office the Case Manager's county falls under. Selections are: SRO, SCRO

7.4.2 Assigned Case Managers

List of case managers currently assigned to the selected case. A maximum number of two Case Managers can be assigned to a client. In order to add another Case Manager, one of the two assignments must be removed by clicking the 'X' button. When case managers are assigned to a case for counties who are not participating in caseload, the system will create a generic caseload for them.

7.4.2.1 Name

Name of assigned Case Manager.

7.4.2.2 Contact No

Case Manager's contact number.

7.4.2.3 Role

Specify role of assigned case manager. Selections are: Caseload Administrator, Case Manager, Nurse Case Administrator, Nurse Case Manager, Patient Financial Services Worker, Physician, MTP Therapist, MTP Supervisor

7.4.2.4 Remove

Clicking the 'X' button on a corresponding row will remove the Case Manager from the selection list.

7.5 Diagnosis

Search for a diagnosis code to assign to a case by entering an ICD code or description and clicking the Find button.

7.5.1 ICD Code

Diagnosis code that identifies client's condition.

7.5.2 Description

Description of diagnosis code that identifies client's condition.

7.5.3 Assigned Diagnosis Codes

List of diagnosis codes currently assigned to the selected case. There is no limit to the number of diagnosis codes that may be assigned to a case. Diagnosis codes may be prioritized as needed.

7.5.3.1 ICD Code
ICD Code assigned to case.

7.5.3.2 Description
Description of ICD Code assigned to case.

7.5.3.3 Diagnosis/Treatment
Indicates if corresponding diagnosis code is approved for Diagnosis only or Treatment. Selections are Dx (Diagnosis), Tx (Treatment)

7.5.3.4 Remove
Clicking the 'X' button on a corresponding row will remove the diagnosis code from the selection list.

7.5.3.5 Priority
Priority is defined by list order. The higher a code falls on the list, the higher the priority. The first code in the list should be set to the primary diagnosis. Click the up/down arrows to change the priority of an ICD.

7.6 Patient / Primary Addressee
Patient and Primary Addressees are required to complete Registration. Cases are assigned only one Patient and one Primary addressee each. *Required field.*

7.6.1 Addressee Type
Indicates the type of addressee listed. Addressee Types are: Patient, Primary

7.6.2 Name and Address
Name and address of Patient or Primary addressee.

7.6.3 Relationship to Patient
Relationship to Patient is dependent on Addressee Type selection and may be filtered based on Addressee Type selection.

Adoptive Parent(s)
Aunt
Brother
Conservator
County Child Protective Services
Cousin
Coworker
CPS Worker
Daughter
Family
Grandfather
Grandmother
Grandparent(s)
Husband
Legal Guardian(s)
Mother
Mother in Law
Nephew
Niece
Non-custodial Parent
Other (Individual)
Relative
Self
SELPA
Sibling
Sister
Social Worker
Son
Special Care Center
Spouse
Step Father
Step Mother

Father	Other Relative	Uncle
Father in Law	Parents	Unknown (Individual)
Foster Care Nurse	Paternal Parent	Wife
Foster Home	Patient's Primary Addressee	
Foster Parent(s)	Regional Center	

7.6.4 Phone(s)

Patient or Primary Addressee's phone number.

7.7 Add Addressee Pop-up Window

A pop-up window is displayed when adding or modifying the Patient/Primary Addressee, allowing a user to create or edit an addressee.

7.7.1 Addressee Type

Indicates the type of addressee listed. Addressee Types are: Patient, Primary. *Required field.*

7.7.2 Relationship to Patient

Indicates the addressee's relationship to patient. See Section 7.6.3 for a list of options that may be displayed in this field. *Required field.*

7.7.3 Copy From

Copy an address from an existing addressee by selecting it from the drop-down.

7.7.4 Name

7.7.4.1 Last Name

Last name of addressee. *Required field.*

7.7.4.2 Appellation

Name suffix of addressee. Selections are: I, II, III, IV, Jr, Sr

7.7.4.3 First Name

First name of addressee. *Required field.*

7.7.4.4 Middle Name

Middle name of addressee.

7.7.5 Attention

Used to direct correspondence to a specific individual within an organization.

7.7.6 Address Line1

Street address or PO Box number of addressee. *Required field.*

7.7.7 Address Line2
Apartment, suite, unit, building, floor, and/or room number of addressee.

7.7.8 City/State/Zip
City and State fields are automatically populated when the Zip code is selected and there is a 1 to 1 match. If multiple cities exist in this zip code, a pop-up window will allow the user to select which city the provider/plan is in. *Required field.*

7.7.9 Email Address
Addressee's email address for electronic communication purposes.

7.7.10 Checkboxes

7.7.10.1 Caregiver
Individual who attends to the needs of the client.

7.7.10.1.1 Involuntary Placement
Client is placed in care without their voluntary consent. Dependent upon Caregiver and is displayed only when Caregiver box is checked. *Hidden field unless dependency is checked.*

7.7.10.2 Do not send mail
Do not send mail to this addressee. Addressee is not listed in other parts of CMS Net for sending correspondence.

7.7.10.3 Bad Address
Mark address as bad, typically due to returned correspondence.

7.7.11 Phone(s)

7.7.11.1 Preferred
Click on radio button on corresponding row to select a phone number as the preferred contact.

7.7.11.2 Type
Type of phone number being added. Selections are: Cell, Fax, Home, TTY, Work

7.7.11.3 Phone Number/Extension
Phone number and extension of contact.

7.7.11.4 Relationship to Patient
Indicates the addressee's relationship to patient. See Section 7.6.3 for a list of options that may be displayed in this field.

7.7.11.5 Phone Notes
Comments regarding corresponding phone number, such as ‘No Calls after 5pm’, or ‘Available 7am-9pm’.

7.7.11.6 Remove
Remove corresponding phone number as a method of contact.

7.7.12 Last Updated By/Last Updated On
Last user to update the selected record on specified date.

7.7.13 Navigation Buttons

7.7.13.1 Find
Find buttons may appear to the right of fields that have a multi-select list which is dynamic, and/or too lengthy to display in a drop-down menu. These fields allow a user to enter search criteria and click the Find button to display a list of results to choose from. A user can then make a selection and search for referrals based on this criteria. These fields are sometimes used in combination with other criteria.

7.7.13.2 Add Phone
Add a new Phone Number to addressee’s record.

7.7.13.3 Save
Saves information that has been selected/entered. Required fields must be complete.

7.7.13.4 Reset
Clears all fields on the referral that is being entered.

7.7.13.5 Close
Close pop-up window and return to Registration – Patient Information screen.

7.8 Siblings - Search Client

7.8.1 Last Name
Enter a sibling’s Last Name then press Enter or click Find to select a sibling.

7.8.2 First Name
Enter a sibling’s First Name and Last Name then press Enter or click Find to select a client. Last Name is required when searching by First Name unless other criteria are entered, such as Gender.

7.8.3 Case

Enter a sibling's 7 digit case number to select a client with a 1 to 1 match. Legacy cases may be less than 7 digits long and the number may grow longer than 7 digits over time.

7.8.4 CIN

Search for a sibling using their 9 digit Client Identification Number (CIN). CIN numbers are formatted as 12345678A. This field is limited to 9 digits. CIN numbers may include a 10th character, called a check digit, and may or may not include a leading space. This check digit should be removed when searching by CIN and will be truncated if the full 10 digit number is pasted into the field.

7.8.5 SSN

Search for a sibling by Social Security Number (SSN) or Pseudo Social Security Number (PSSN), an alternate number issued in lieu of a valid SSN. SSN is a 9 digit number, formatted as 123-45-6789. PSSN is a total of 9 characters long, 8 digits and ends with the letter P, formatted as 123-45-678P.

7.8.6 DOB

Search for a sibling by Date of Birth (DOB), using the format MM/DD/YYYY or M/D/YY. This field is typically used in combination with the client's name and gender.

7.8.7 Gender

Search for a client by selecting their Gender from the dropdown list. This field is typically used in combination with a name and date of birth. The following selections are available: Male, Female, Not Known

7.8.8 County

Search for a sibling by selecting their County. This field is typically used in combination with other selections, such as client name, gender and/or date of birth.

7.9 Other Information

7.9.1 Chart Number

County specified chart number for client. This field has a maximum length of 20 characters.

7.9.2 HRIF
Flag client for High Risk Infant Follow-up, indicating client is an infant who is at risk of developing CCS eligible conditions after discharge from a CCS-approved NICU. Flag will remain on case until removed by user. A future enhancement will automatically uncheck the flag when the child turns 3.

7.9.3 Known To
Indicates which programs the client is recognized by. Options are: CCS, GHPP, HF, MEDS, SAWS, WIC, CATS, HAP

7.9.4 SCI Last Updated On
Indicates last date SCI Inquiry screen was updated for selected case.

7.10 MEDS Inquiry Information

7.10.1 Registered By
User who registered client in CMS Net.

7.10.2 Registered On
Date client was registered in CMS Net.

7.10.3 Last Updated By/Last Updated On
Last user to update the selected record on specified date.

7.11 Navigation Buttons

7.11.1 Add Alias
Add previous a previous name the selected client has used.

7.11.2 Find
Find buttons may appear to the right of fields that have a multi-select list which is dynamic, and/or too lengthy to display in a drop-down menu. These fields allow a user to enter search criteria and click the Find button to display a list of results to choose from. A user can then make a selection and search for referrals based on this criteria. These fields are sometimes used in combination with other criteria.

7.11.3 Add Addressee
Click on the Add Addressee button to add patient or primary addressees. This button is hidden when both patient and primary addressee are present.

7.11.4 Back
Returns user to the previous screen.

7.11.5 Save

Saves information that has been selected/entered. Required fields must be complete.

7.11.6 Reset

Clears all criteria previously selected or entered in fields.

7.11.7 ADD SAR

This button will navigate to the search provider screen

7.11.8 Face Sheet

Displays a summary of a client’s case information in a PDF format for viewing or printing

8 REGISTRATION – ADDRESSEE TAB

8.1 Client Information Header

See Section 5 for information about the Client Information header.

8.2 Addressee Information Preview

8.2.1 Select

Select an addressee by clicking on the radio button on corresponding row. The selected addressee's contact information will be displayed below, in the Addressee Information section.

8.2.2 Addressee Type

Indicates what type of addressee is listed. Options are: Medical Home, Other, Secondary, Special Care Center, Specialist.

8.2.3 Name and Address

Name and address of addressee.

8.2.4 Relationship to Patient

Indicates the addressee's relationship to patient. See Section 7.6.3 for a list of options that may be displayed in this field.

8.2.5 Phone(s)

Addressee's phone number.

8.2.6 Remove

Clicking the 'X' button on a corresponding row will remove the addressee from the selection list.

8.3 Addressee Information

Fields in this section are dynamic, depending on the Addressee Type and selected Relationship to Patient. Users may click the Reset button to clear the fields in this section.

8.3.1 Addressee Type

Select an Addressee type to indicate what type of contact is being added. Selections are: Medical Home, Other, Secondary, Special Care Center, Specialist. *Fields may be dynamic or options auto-selected depending on selection*.

8.3.2 Relationship to Patient

Relationship to Patient is dependent on Addressee Type selection and may be filtered based on Addressee Type selection. *Required field.*

Adoptive Parent(s)
Advocate
Aunt
Brother
Clergy
Conservator
County Child Protective Service
Cousin
Coworker
CPS Worker
Daughter
Educational Provider
Family
Father
Father in Law
Foster Care Nurse
Foster Home
Foster Parent(s)
Grandfather
Grandmother
Grandparent(s)
Group Home Provider
Husband
ICF-DD Facility
In Home Provider
Legal Guardian(s)
Local Educational Agency
Medical Home
Medical Provider
Mother
Mother in Law
Nephew
Niece
Non-custodial Parent
Other (Facility)
Other (Individual)
Other Relative
Outside Medical Care Facility
Parents
Paternal Parent
Patient's Primary Addressee
Pediatric Sub-acute Facility
Physician
Provider (Group/Facility)
Provider (Individual)
Regional Center
Relative
School
Self
SELPA
Sibling
Sister
Skilled Nursing Facility
Social Worker
Son
Special Care Center
Spouse
Step Father
Step Mother
Uncle
Unknown (Facility)
Unknown (Individual)
Wife

8.3.3 Provider Number

Provider Number is dependent on Relationship to Patient selection and may not be displayed for certain relationship types. Search for provider or plan, using their NPI, Medi-Cal/Denti-Cal, or SCC numbers. When searching for a provider, Provider/Plan Number results are filtered based on Referral Source and Provider/Plan Type. If a provider is not in the system, a new non-PMF provider may be added by entering the required provider details and saving the referral. *Required field if displayed.*

8.3.4 Medical Record Number

A number issued by a client's provider or plan that is unique to the individual or institution that issued it, but may not be unique within CMS Net. Therefore, the same medical record number may potentially appear on more than one case. This number may be entered in Registration on the Addressee tab when an addressee is added and is dependent on the selected Relationship to Patient. This field has a maximum length of 20 characters and is not a required field.

8.3.5 Provider Type

Provider Type is dependent on Relationship to Patient selection and may not be displayed for certain relationship types. The Provider Type may also be auto-selected for some relationships. When performing a search to add a provider as an addressee, the results are filtered based on the selected Provider Type. *Required field if displayed.*

8.3.6 Specialty

Specialty field is only displayed when Addressee Type is set to Specialist. Allows user to indicate what medical field this specialist is in. *Required field if displayed.*

8.3.7 Name

8.3.7.1 Addressee – Individual

8.3.7.1.1 Last Name

Last name of provider. *Required field.*

8.3.7.1.2 Appellation

Name suffix of provider. Selections are: I, II, III, IV, Jr, Sr

8.3.7.1.3 First Name

First name of client. *Required field.*

8.3.7.1.4 Middle Name

Middle name of client.

8.3.7.2 Addressee – Group or Institution

Enter the name of the Special Care Center or Group/Institution and click on Find to search. *Required field.*

8.3.8 Attention

Used to direct correspondence to a specific individual within an organization.

8.3.9 Address Line 1

Street address or PO Box number of addressee. *Required field.*

8.3.10 Address Line 2

Apartment, suite, unit, building, floor, and/or room number of addressee.

8.3.11 City/State/Zip

City and State fields are automatically populated when the Zip code is selected and there is a 1 to 1 match. If multiple cities exist in this zip code, a pop-up window will allow the user to select which city the provider/plan is in. *Required field.*

8.3.12 Email Address

Addressee's email address for electronic communication purposes.

8.3.13 Caregiver

Individual who attends to the needs of the client.

8.3.13.1 Involuntary Placement

Client is placed in care without their voluntary consent. Dependent upon Caregiver and is displayed only when Caregiver box is checked. *Hidden field unless dependency is checked.*

8.3.14 Do not send mail

Do not send mail to this addressee. Addressee is not listed in other parts of CMS Net for sending correspondence.

8.3.15 Bad Address

Mark address as bad, typically due to returned correspondence.

8.3.16 Phone(s)

8.3.16.1 Preferred

Click on radio button on corresponding row to select a phone number as the preferred contact.

8.3.16.2 Type

Type of phone number being added. Selections are: Cell, Fax, Home, TTY, Work

8.3.16.3 Phone Number/Extension

Phone number and extension of contact.

8.3.16.4 Relationship to Patient

Indicates the addressee's relationship to patient. See Section 8.3.2 for a list of options that may be displayed in this field.

8.3.16.5 Phone Notes

Comments regarding corresponding phone number, such as 'No Calls after 5pm', or 'Available 7am-9pm'.

8.3.16.6 Remove

Remove corresponding phone number as a method of contact.

8.3.17 Last Updated By/Last Updated On

Last user to update the selected record on specified date.

8.4 Navigation Buttons

8.4.1 Add Addressee

Click to display a blank record for adding a new addressee record. If unsaved information is entered and the user tries to leave the screen, an error will display prompting user to save the record.

8.4.2 Find

Find buttons may appear to the right of fields that have a multi-select list which is dynamic, and/or too lengthy to display in a drop-down menu. These fields allow a user to enter search criteria and click the Find button to display a list of results to choose from. A user can then make a selection and search for referrals based on this criteria. These fields are sometimes used in combination with other criteria.

8.4.3 Add Phone

Click to display a new row so additional phone numbers may be added.

8.4.4 Back

Navigate back to the previous page.

8.4.5 Save

Saves information that has been selected/entered. Required fields must be complete.

8.4.6 Reset

Clears all criteria previously selected or entered in fields.

9 Registration - Additional Information Tab

9.1 Client Information Header

See Section 5 for information about the Client Information header.

9.2 Documentation

The Documentation section of the Additional Information tab allows users to record a note when any documentation is received for a client.

9.2.1 Document Type

Type of document being added to case. Selections are: Clinic Visit Notes, Court Papers, Discharge Summary, H&P, Notice of Admission, Other, Progress Notes

9.2.2 Description

Free text description of the document being added.

9.2.3 Received Date

Date the document was received.

9.2.4 Add Document Pop-up Window

9.2.4.1 Document Type

Type of document being added to case. Selections are: Clinic Visit Notes, Court Papers, Discharge Summary, H&P, Notice of Admission, Other, Progress Notes

9.2.4.2 Description

Free text description of the document being added.

9.2.4.3 Received Date

Date the document was received.

9.2.4.4 Document Addressee

Click Document Addressee link to add an addressee for the document received.

9.3 Application Status

9.3.1.1 Application Status of "Signed App" with date signed and "No Action" with reason for no action taken

9.3.1.2 App Status Comments: After selecting the application status, enter an application case note comment. This is optional.

9.4 Case Notes / Comments

For each client, if a comment with a particular Subject is entered by a user, a narrative is created in the Case Notes section of CMS Net. If the same user selects the same subject and modifies the comment on the same day, the existing Case Note will get updated. If a different Subject is selected, a new Case Note is created. Text entered in the body of the comment is retained during the day that the draft is still editable but is no longer retained after the day passes and will not populate text until a new case note is entered for corresponding subject.

9.4.1 Subject

Choose subject to indicate what type of comment is to be added. Selections are: Referral Information, Referral Tracking-Case, Registration Information

9.4.2 Body

Enter the body of the narrative and click Save to generate a Case Note.

9.5 Case Notes History

9.5.1 Note Date

Date Note was entered.

9.5.2 Subject

Subject which indicates type of comment. Options are: Referral Information, Referral Tracking-Case, Registration Information

9.5.3 Text

Body of case note that was added.

9.6 Last Updated By/Last Updated On

Last user to update the selected record on specified date.

9.7 Navigation Buttons

9.7.1 Find

Find buttons may appear to the right of fields that have a multi-select list which is dynamic, and/or too lengthy to display in a drop-down menu. These fields allow a user to enter search criteria and click the button to display a list of results to choose from. A user can then make a selection and search for referrals based on this criteria. These fields are sometimes used in combination with other criteria.

9.7.2 Add Document

Add a document for selected client.

9.7.3 Back

Returns user to the previous screen.

9.7.4 Save

Saves information that has been selected/entered. Required fields must be complete.

9.7.5 Reset

Clears all criteria previously selected or entered in fields.

10 SUMMARY TAB

10.1 Client Information Header

See Section 5 for information about the Client Information header.

10.2 Summary Information

The Summary tab provides a historical timeline of events that have transpired on a case. Events such as creation or status changes pertaining to correspondence, case notes, SARs, ticklers, and appointments will appear in the summary.

10.2.1 Event Date

Date the event occurred.

10.2.2 Time

Time the event occurred.

10.2.3 Event

The type of event that occurred.

10.2.4 Information

Detailed description of the event. The description is displayed as a link which will route to the correspondence, case note, SAR, tickler, or appointment indicated.

10.2.5 Navigation Buttons

10.2.5.1 Sort By

Click the Up/Down arrows next to column headers to sort events in ascending or descending order.

10.2.5.2 Back

Returns user to the previous screen.

11 MARK DUPLICATE

Mark Duplicate allows a client to be marked as a duplicate of another case. The Mark Duplicate tab will not be displayed if a case's status is set to Active. In order to mark an active case as duplicate, the case must first be closed or reverted back to the previous pending status.

11.1 Correct Patient – Search Client

11.1.1 Last Name

Enter a client's Last Name then press Enter or click Find to select a client.

11.1.2 First Name

Enter a client's First Name and Last Name then press Enter or click Find to select a client. Last Name is required when searching by First Name unless other criteria are entered, such as Gender.

11.1.3 Case

Enter a client's 7 digit case number to select a client with a 1 to 1 match. Legacy cases may be less than 7 digits long and the number may grow longer than 7 digits over time.

11.1.4 CIN

Search for a client using their 9 digit Client Identification Number (CIN). CIN numbers are formatted as 12345678A. This field is limited to 9 digits. CIN numbers may include a 10^{th} character, called a check digit, and may or may not include a leading space. This check digit should be removed when searching by CIN and will be truncated if the full 10 digit number is pasted into the field.

11.1.5 SSN

Search for a client by Social Security Number (SSN) or Pseudo Social Security Number (PSSN), an alternate number issued in lieu of a valid SSN. SSN is a 9 digit number, formatted as 123-45-6789. PSSN is a total of 9 characters long, 8 digits and ends with the letter P, formatted as 123-45-678P.

11.1.6 DOB

Search for a client by Date of Birth (DOB), using the format MM/DD/YYYY or M/D/YY. This field is typically used in combination with the client's name and gender.

11.1.7 Gender

Search for a client by selecting their Gender from the drop-down list. This field is typically used in combination with a name and date of birth. The following selections are available: Male, Female, Not Known

11.1.8 County

Search for a client by selecting their County. This field is typically used in combination with other selections, such as client name, gender and/or date of birth.

11.2 Mark Duplicate Instructions

To mark a case as a duplicate of another case, search for the correct case by using these search criteria. Remember to choose carefully when determining which case will be kept as the ongoing record and which will be marked as duplicate. Typically the case with the most history and authorizations is kept as the ongoing record.

Please walk through the following steps BEFORE marking a case as a duplicate:

- SARs and Correspondences will not be transferred to the ongoing (non-duplicative) case. You may need to manually re-enter them on the ongoing case.
- Evaluate the Client Eligibility History in order to maintain complete eligibility information (last 3 years) for payment of SARs.
- Case notes, excluding system generated notes, may be transferred by State System Administrators. Please contact the Help Desk for assistance.

11.3 Last Updated By/Last Updated On

Last user to update the selected record on specified date.

11.4 Navigation Buttons

11.4.1 Find

Find buttons may appear to the right of fields that have a multi-select list which is dynamic, and/or too lengthy to display in a drop-down menu. These fields allow a user to enter search criteria and click the Find button to display a list of results to choose from. A user can then make a selection and search for referrals based on this criteria. These fields are sometimes used in combination with other criteria.

11.4.2 Back

Returns user to the previous screen.

11.5 Marking a Case as Duplicate

From the Mark Duplicate Tab:

1. Verify the proper action has been taken prior to marking the case as duplicate. See Section 11.2 for Mark Duplicate Instructions.
2. Click on Patient Registration in the menu bar in CMS Net Web. If duplicate case is already being viewed, skip to step 3.
3. Search for the duplicate case and click Edit Patient.

4. Click on the Mark Duplicate tab.
5. Search for and select the correct case which will be kept as the ongoing record.
6. Click Mark Duplicate button.

From Patient Registration:

1. Verify the proper action has been taken prior to marking the case as duplicate. See Section 11.2 for Mark Duplicate Instructions.
2. Click on Patient Registration in the menu bar in CMS Net Web.
3. Click on the Mark Duplicate button. Registration will open and land on the Mark Duplicate tab.
4. Search for and select the correct case which will be kept as the ongoing record.
5. Click Mark Duplicate button.

12 Registering a New Case in CMS Net Web

12.1 SCI Inquiry Tab

1. Login to CMS Net Web and click on Registration link in menu bar.
2. Search for patient and click Edit Patient if a referral has already been entered for this client in Referral Tracking. If this is a new client, click New Patient.
3. If linking to an existing CIN, proceed to Section 12.1.1.
   If linking to a new CIN, proceed to Section 12.1.2.

12.1.1 Linking to an Existing CIN:

Link case to a CIN that currently exists in MEDS for this client:

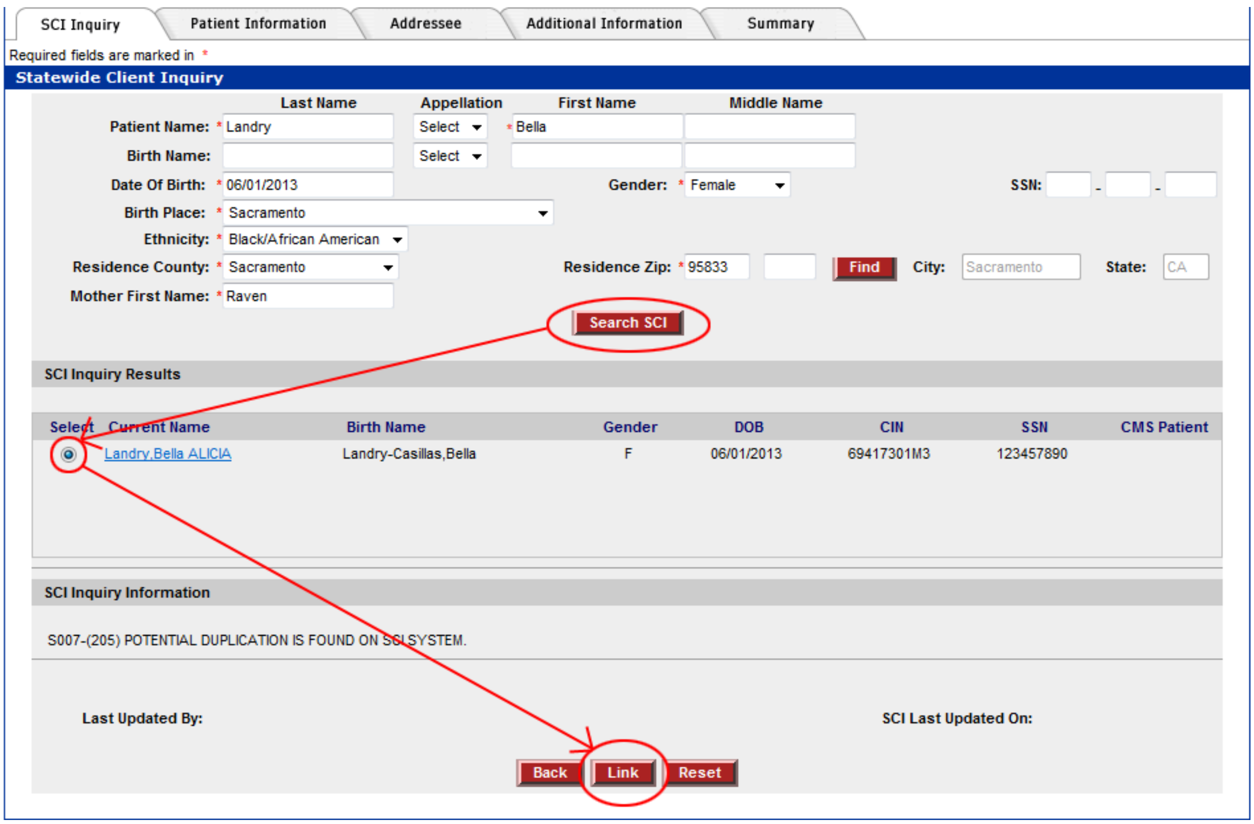


Figure 12-1

1. Enter client information in the top section of the screen.
2. Click the Search SCI button.
3. Results will appear in SCI Inquiry Results. Look for the desired CIN. If found, select the CIN by clicking on the radio button on the left side of the corresponding row and click the Link button.
4. Any fields blank fields will be automatically filled in, based on selected CIN.
5. Registration will proceed to Patient Information tab. See Section 12.2.

12.1.2 Linking to a New CIN:

Force add a new CIN to a case for a client who does not currently have a CIN in MEDS:

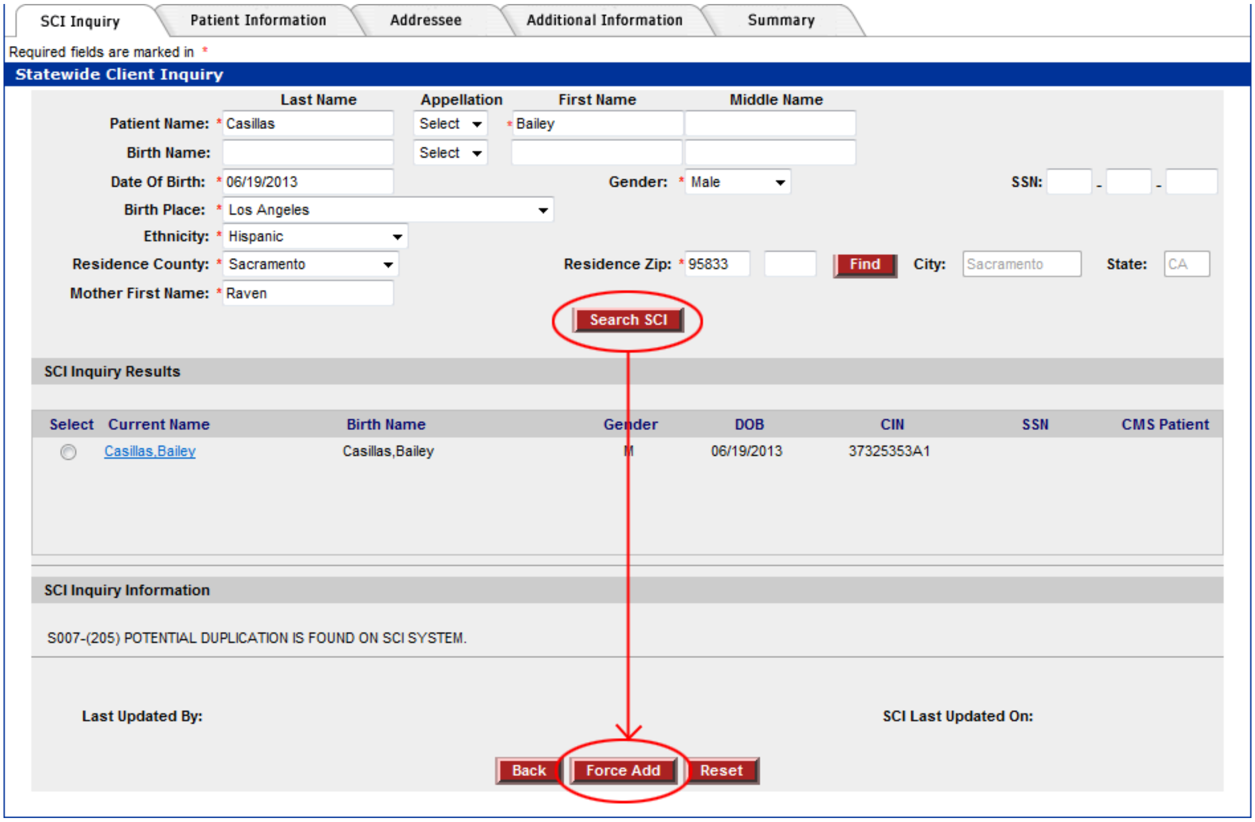


Figure 12-2

1. Enter client information in the top section of the screen.
2. Click the Search SCI button.
3. Results will appear in SCI Inquiry Results. Check for any possible matches. If no existing CIN is known and no potential matches are found, do not select any results. (Note: If the wrong CIN gets selected, click the Search SCI button to deselect.)
4. Click the Force Add button.
5. Registration will proceed to Patient Information tab. See Section 12.2.

12.1.3 CIN Linking Issues

The following items in CMS Net must match exactly what is shown in MEDS for a CIN to appear in the SCI Inquiry results:

- First Name
- Middle Name (hint: may be entered as part of the first name field in MEDS)
- Last Name
- Date of Birth
- Gender

- Social Security Number
- Pseudo #

12.1.3.1 Desired CIN Linked to Duplicate Case

Look up the existing case to access whether it is a duplicate of the case you are working on. To determine which case the CIN is currently linked to, search for the case by CIN in Registration. If the two cases are for the same client, this is a duplicate case. Refer to Section 11.2 for instructions on determining which case to keep as the ongoing record and marking a case as duplicate.

12.1.3.2 Desired CIN Not Found in SCI Inquiry Results

Check that the required information in CMS Net matches what is displayed in MEDS. See Section 12.1.3 for a list of criteria that must match in CMS Net and MEDS to return a record.

If there is a known CIN for a client but a user is unable to find it when running the SCI Inquiry, it is likely that information being entered about the client does not match what is stored in MEDS. Launch MEDS and pull up the CIN to compare the information in MEDS to the information being entered in CMS Net.

If the information in CMS Net is incorrect, update the registration record on the Patient Information tab with the correct information, then run the SCI Inquiry again. If the information in MEDS is incorrect, the client's primary care or the client themselves must contact their Medi-Cal eligibility worker to update their record in MEDS. As a temporary workaround, the record in CMS Net can be modified to match the incorrect information displayed in MEDS until the CIN is linked, then can be changed back to the correct information.

12.1.3.3 Case Linked to Wrong CIN, Relink to Correct CIN

Click on the SCI Inquiry tab and re-select the Residence County and Residence Zip. Click the Search SCI button. Select the correct CIN and click the Link button. To link to a new CIN, do not select anything and click the Force Add button.

12.1.3.4 Desired CIN Linked to Wrong Case

If the CIN on Case A belongs to Case B, relink the CIN on Case A to another CIN. Once Case A is linked to a new CIN, the old one will be released and may be linked to Case B.

If there is no existing CIN for Case A, go to Registration and search for Case A and click Edit Patient. On the SCI Inquiry tab, click on Search SCI then click on Force Add to link to a new CIN. Link Case B to released CIN.

If there is an existing CIN for Case A, go to Registration and search for Case A and click Edit Patient. On the SCI Inquiry tab, click on Search SCI, select the correct CIN and click Link. If correct CIN is not in list, see Section 12.1.3 for a list of criteria that must match in CMS Net and MEDS to return a record. Link Case B to released CIN.

12.1.3.5 Desired CIN Linked to Wrong Case in Another County

When attempting to link to a CIN, error is received stating that the CIN is already linked to another case, but that case is in a different county. Please contact the other county and request they link the case to a different CIN so desired CIN is released and may be linked to the correct case.

12.1.3.6 CINs are Reversed on Two Cases

This scenario typically happens with twins or siblings, when Case A is linked to Case B's CIN and Case B is linked to Case A's CIN. Link Case A to a new CIN by clicking on SCI Inquiry tab then without making a selection, click on Force Add button. This will release the CIN so it can be linked to Case B. Once the CIN is correctly linked to Case B, its previous CIN will be released. Go back to Case A and link to correct CIN.

12.2 Patient Information Tab

Figures 12-3 and 12-4 shows the Patient information screen

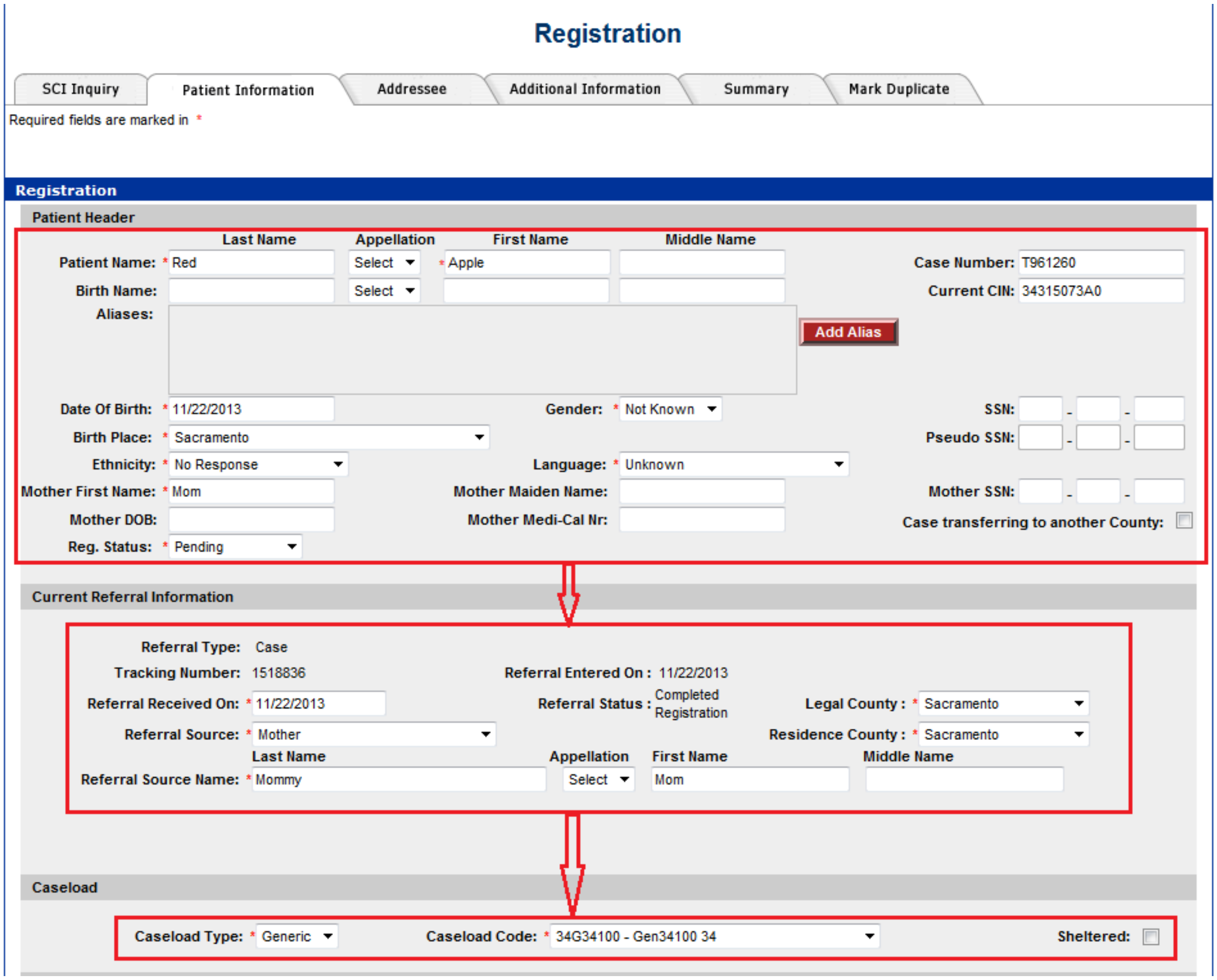


Figure 12-3

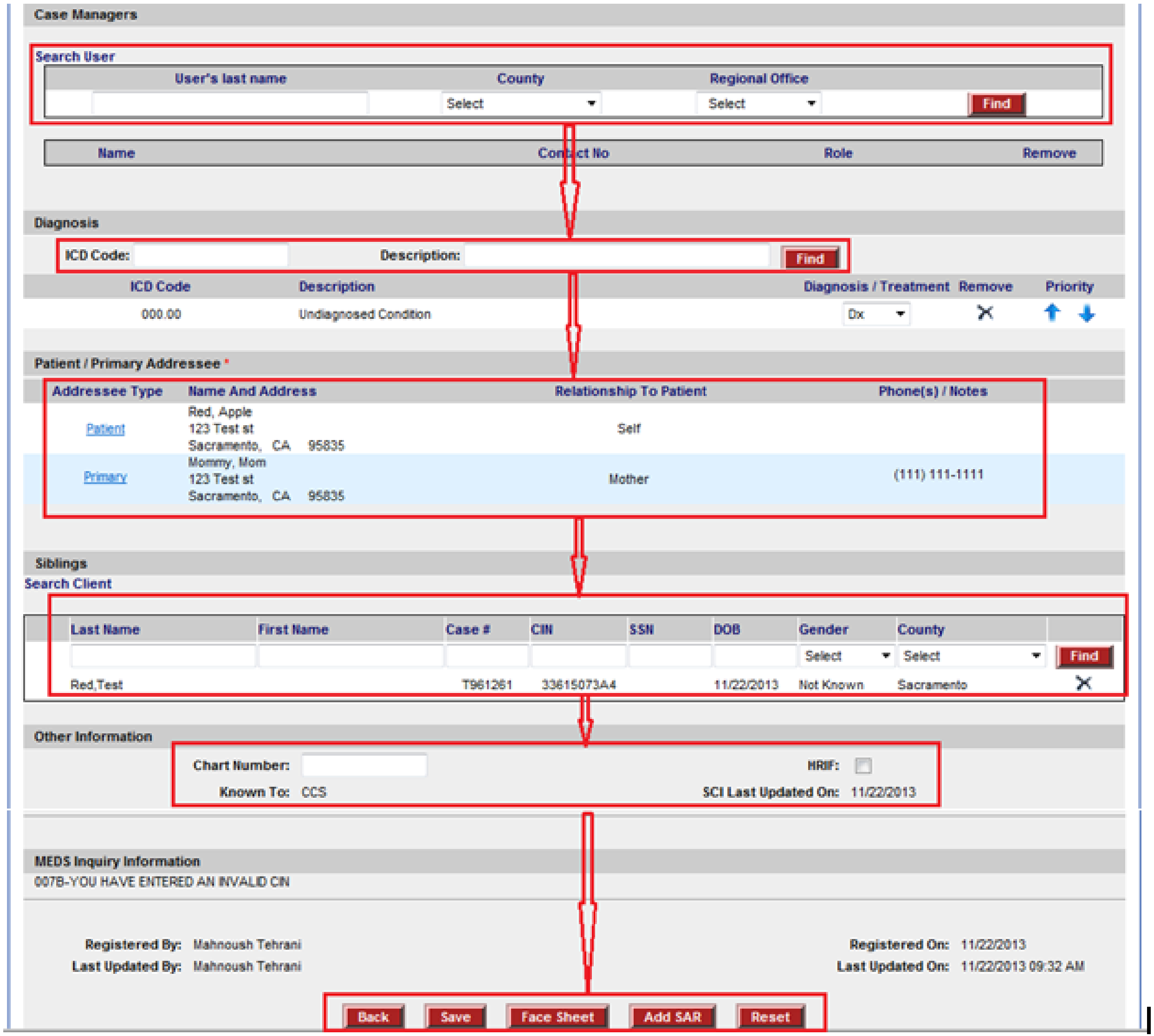
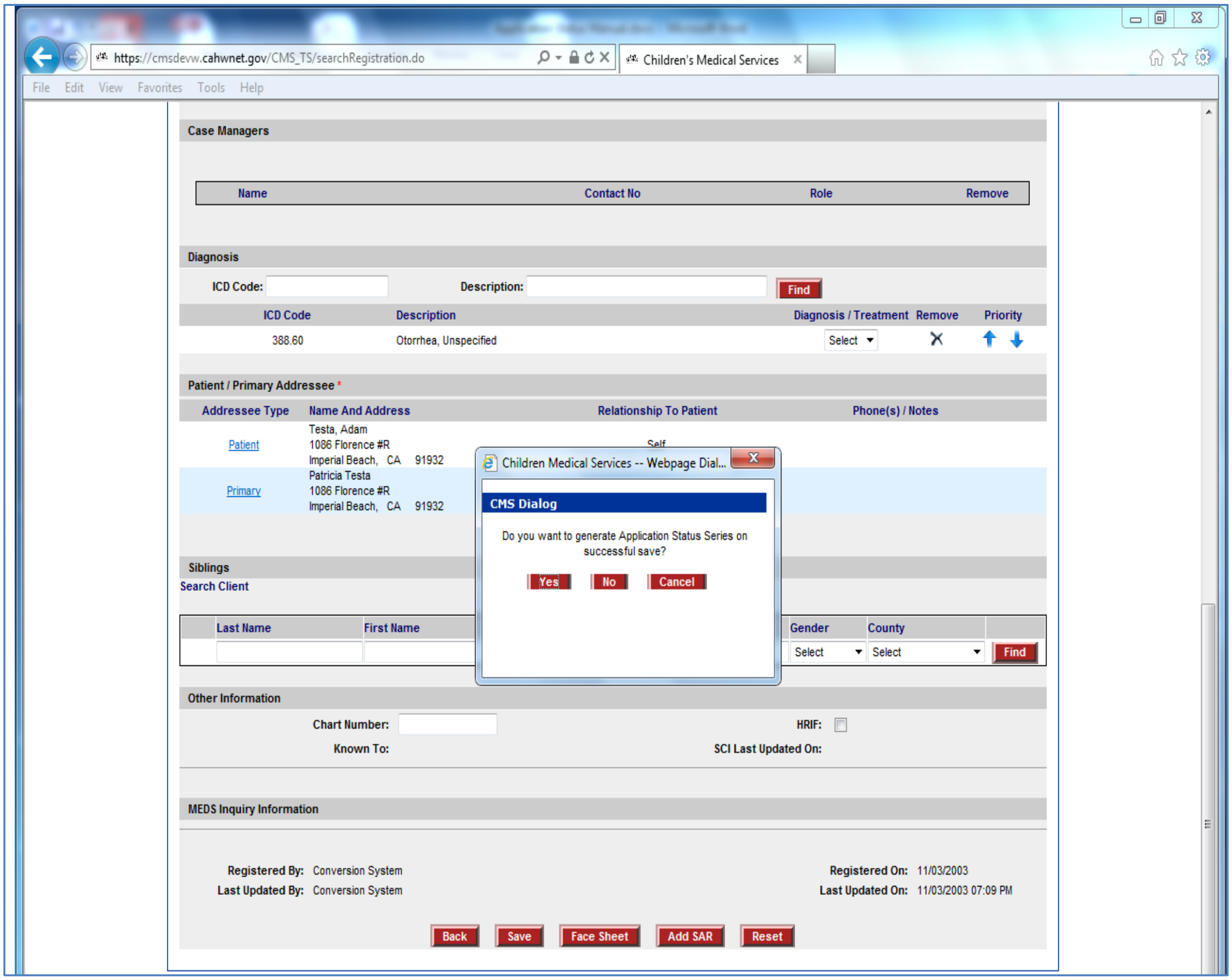

Case Managers
Search User
User's last name
County
Regional Office
Select
Select
Find
Name
Contact No
Role
Remove
Diagnosis
ICD Code:
Description:
Find
ICD Code
Description
Diagnosis / Treatment
Remove
Priority
000.00
Undiagnosed Condition
Dx
Patient / Primary Addressee *
Addressee Type
Name And Address
Relationship To Patient
Phone(s) / Notes
Patient
Red, Apple
123 Test st
Sacramento, CA 95835
Self
Primary
Mommy, Mom
123 Test st
Sacramento, CA 95835
Mother
(111) 111-1111
Siblings
Search Client
Last Name
First Name
Case #
CIN
SSN
DOB
Gender
County
Select
Select
Find
Red,Test
T961261
33615073A4
11/22/2013
Not Known
Sacramento
Other Information
Chart Number:
HRIF:
Known To: CCS
SCI Last Updated On: 11/22/2013
MEDS Inquiry Information
007B-YOU HAVE ENTERED AN INVALID CIN
Registered By: Mahnoush Tehrani
Last Updated By: Mahnoush Tehrani
Registered On: 11/22/2013
Last Updated On: 11/22/2013 09:32 AM
Back
Save
Face Sheet
Add SAR
Reset

Figure 12-4

1. Enter client's information in Patient Header section. See Section 7.1 for more information about the Patient Header section.
2. Enter referral information in Current Referral Information section. See Section 7.2 for more information about the Current Referral Information section.
3. Enter Caseload information. For counties that do not use caseloads, there should be only one option. When there is only one option, the drop-down will automatically select this option. See Section 7.3 for more information about the Caseload section.
4. Select Case Managers for the client by entering the Case Manager's last name and/or county and regional office then click the Find button to search for and select the individual. A maximum of two Case Manager may be assigned for each case. See Section 7.4 for more information about Case Managers.
5. Select any diagnosis codes by entering the ICD Code or Description and clicking the Find button to search. An unlimited number of ICD's may be added. Use the arrows to adjust priority. See Section 7.5 for more information about the Diagnosis section.
6. Click on Add Addressee and assign the patient and primary addressees. See Section 7.6 for more information about addressees.
7. If applicable, complete the Other Information section by entering a chart number and/or indicating High Risk Infancy Follow-up by checking the HRIF box.
8. Click Save to save the client's record and generate a case number.
9. Application Letter Non-series may be generated when cases are in the following statuses on the first update user will receive a notification if they would like to create a letter:
    - Pending
    - Reopen Pending
    - Active



Yes: System navigates user to the Correspondence page.

- ➢ Create Correspondence page

No: Stay on screen with saved client information update

12.3 Addressee Tab

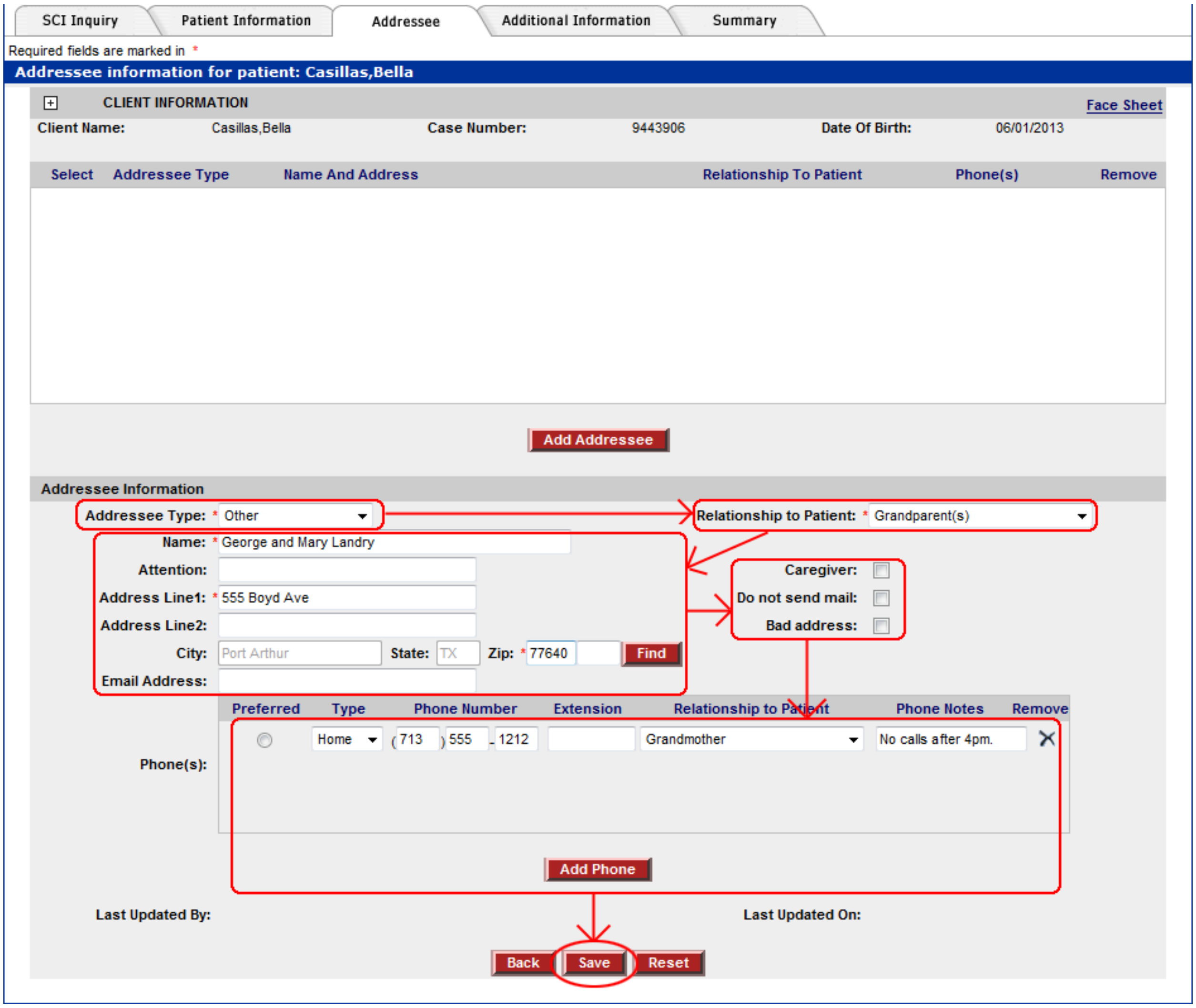


Figure 12-4

1. Choose Addressee Type. See Section Addressee Type8.3.1 for more information about Addressee Type.
2. Choose Relationship to Patient. Relationship to Patient is filtered based on Addressee Type and if only one option is available will be auto-selected. See Section 8.3.2 for more information about Relationship to Patient.
3. Fields on this screen are dynamic and depending on the Relationship to Patient chosen, fields that are relevant to the type of addressee will be displayed. If addressee is a provider or institution, search for the desired individual or group by entering a provider number or name and clicking the Find button. If addressee is an individual, enter the name and address as required. See Section 8.3 for more information about entering the addressee information.

4. If the addressee is a Caregiver, or has requested no mail at this address, or the listed address is no longer valid, click the corresponding check box.
5. Click the Add Phone button to add a phone number line and enter the phone number. Click the Add Phone button to add additional phone numbers.
6. Click Save to save the addressee. Once the address is successfully saved, it will show up in the preview window at the top, as seen in Figure 12-5. If selected, the addressee may be modified as needed.

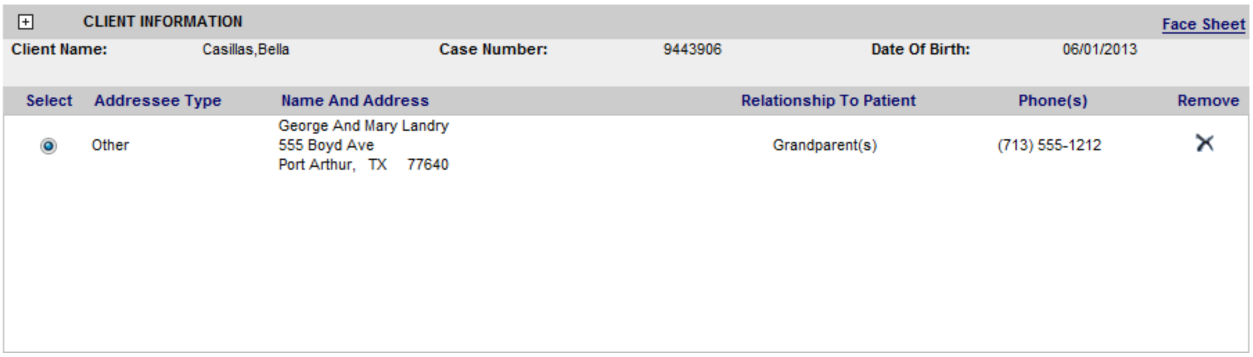


Figure 12-5

12.4 Additional Information Tab

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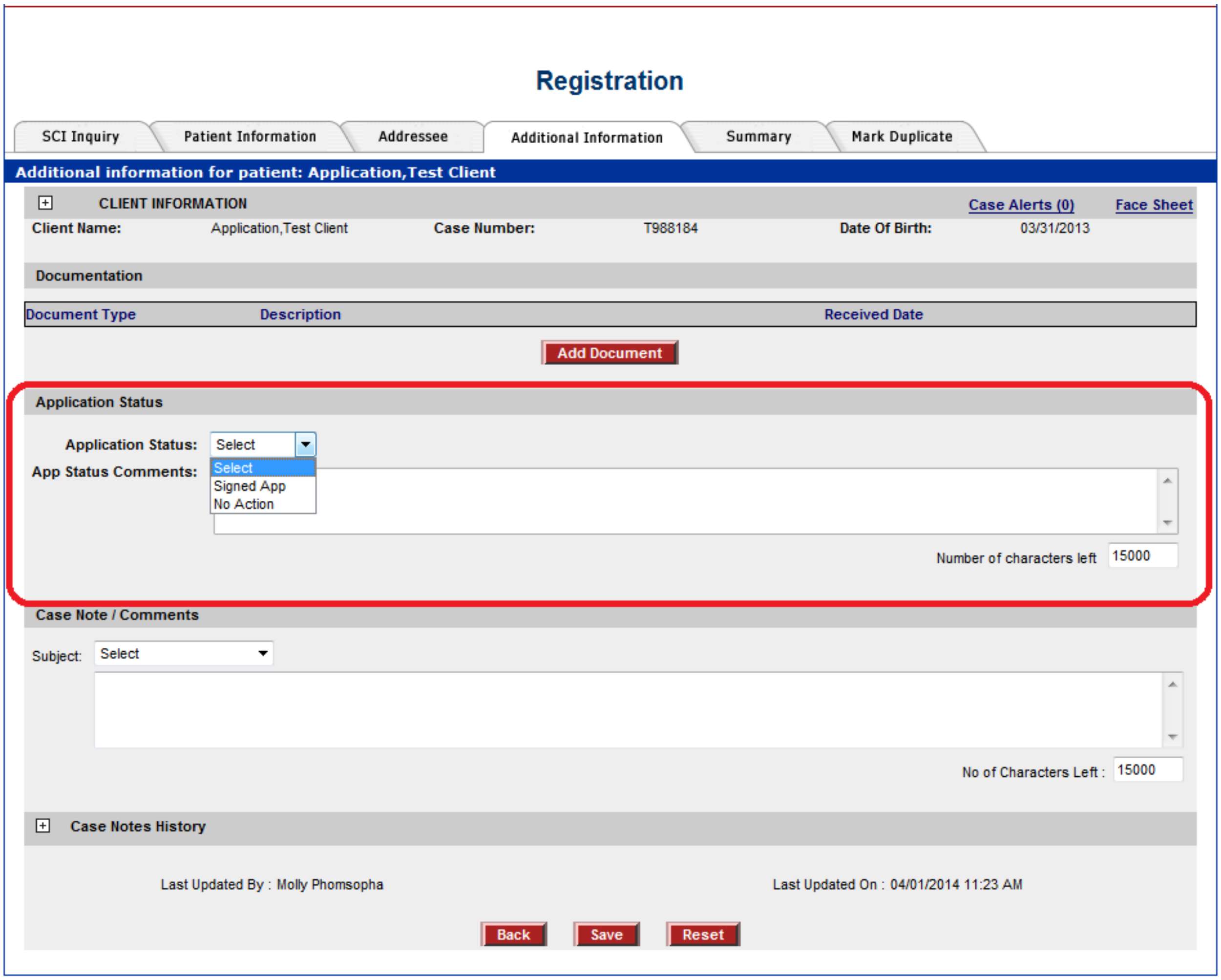
12.4.1 Documentation

Record a note when any documentation is received for a client. See Section 9.2 for more information about Documentation.

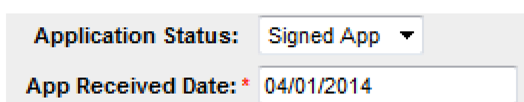
1. Click the Add Document button to bring up the Add Document pop-up window.
2. Select the Document Type from the drop-down menu.
3. Add any notes pertaining to the document in the Description field.
4. Enter the Received Date.
5. If applicable, add a addressee for the received document by clicking the Document Addressee link and fill out the addressee information then click the Save button.
6. Click Continue.
7. On the Additional Information, click Save.
8.

12.4.2 Application Status

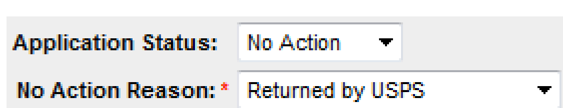


Update Status via Registration can utilize to update application status:

- Option One: Update Status as "Signed App" with date signed.
  - If Signed App is selected, App Received Date field will enable for signed date to be entered



- Option Two: Update Status as "No Action" with reason for no action taken.
  - If No Action is selected, No Action Reason field will enable for reason to be selected from drop down.



- **App Status Comments:** After selecting the application status, enter an application case note comment. This is optional
- **Save:** Click "Save" button when done and system will save updated status and auto generate case notes for the status update.

12.4.3 Case Note/Comments

Enter a subject and body of narrative and click the Save button. See Section 9.3 for information about adding comments on the Additional Information tab.

12.4.4 Eligibility

After the patient has been registered in CMS Net Web, eligibility may be completed and if applicable, the case can be activated.